



Health Policy Authority clarifies Medicaid managed care issues

In response to questions raised concerning the plans to implement the new Medicaid managed care contracts, the Kansas Health Policy Authority (KHPA) has provided KMS with additional, clarifying information.

KHPA emphasized that its primary goal during the transition period to the two new managed care contractors is to assure that there is no interruption in access to health care services for the roughly 160,000 program beneficiaries that will be affected by the changes in the program. KHPA is working closely with provider groups and the new managed care companies to assure a smooth transition on January 1 with minimal disruption to patients and providers.

In response to KMS' concern about whether one or both of the new managed care plans would have adequate time to complete their provider networks by the end of the year, KHPA indicated that network development efforts at this time are the highest priority. The agency is closely monitoring the progress of both contractors, UniCare and Family Health Partners, and expects them to be ready to go by January 1. However, if either contractor is not ready to go by the transition date, for whatever reason, a plan would be in place to make sure that there was no disruption in care for patients and their physicians.

It should be noted that the process for selecting the new managed care contractors, including the transition timetable, was developed by its predecessor agency and already well under way before KHPA assumed responsibility for the Medicaid program this past July. KHPA points out that the deadline for the transition was unavoidable due to the fact that the current contract period was expiring, and could not legally be extended past January 1. The agency is aware that the timetable it was compelled to work within requires contracting decisions by providers to move forward fairly quickly. While KHPA encourages providers to contract with one or both of the managed care plans, it also recognizes that providers need adequate time to make those contracting decisions.

KMS appreciates the clarification provided on these points, as well as KHPA's willingness to work with KMS to communicate important information on this program to the physician community.

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